

Travel & Expense Account
Transmittal Sheet

After Approval, Mail Receipts To

Alcohol & Drug Programs RF#209
1700 K Street
Sacramento, CA 95814



Employee Name	ZITO, Renee
Expense Dates	11/02/09-11/03/09
Total Expense Amount	545.08
Amount Due Employee	203.88
Form ID	TEA000536768

DIRECTIONS FOR SUBMISSION

1. *Attach the following receipts, and other appropriate documentation to this Transmittal Sheet.*

	Date	Expense Item	Amount	If not submitted - Explain
1)	11/02	Lodging	111.38	
2)	11/03	Parking, Auto	18.00	

2. *Forward Transmittal Sheet and attached documentation through your approval process.*

I have reviewed the following documents.

Approved by:

MICHAEL S CUNNINGHAM

Travel & Expense Account Summary

Employee Name Renee ZITO
Expense Dates 11/02/09-11/03/09
Report Name Stepping Stone Visit

Request Total \$ 545.08
Direct Charge Total - 341.20
Travel Advances - 0.00
Net Due Employee = 203.88

Trip Totals		
Trip/Expense Category	Trip Name	Total Amount
Regular Travel	Step. Stone	545.08

NOTE: (d)=Direct Charge

DATE	Mon Nov 2	Tue Nov 3								TOTAL
Commercial Air Fare (d)	341.20									341.20
Lodging	111.38									111.38
Dinner	18.00	18.00								36.00
Mileage, Personal Auto	5.50	11.00								16.50
Breakfast		6.00								6.00
Lunch		10.00								10.00
Incidentals		6.00								6.00
Parking, Auto		18.00								18.00
TOTALS \$	476.08	69.00								545.08

Travel & Expense Account Transmittal Sheet

After Approval, Mail Receipts To

Alcohol & Drug Programs RF#209
1700 K Street
Sacramento, CA 95814



Employee Name	ZITO, Renee
Expense Dates	11/08/09-11/11/09
Total Expense Amount	763.77
Amount Due Employee	763.77
Form ID	TEA000543957

DIRECTIONS FOR SUBMISSION

1. Attach the following receipts, and other appropriate documentation to this Transmittal Sheet.

	Date	Expense Item	Amount	If not submitted - Explain
1)	11/08	Lodging	132.09	
2)	11/09	Lodging	132.09	
3)	11/10	Lodging	132.09	

2. Forward Transmittal Sheet and attached documentation through your approval process.

EXPENSE EXCEPTION(S)

	Expense Rule	Exception	Response
1)	#46a DPA required - Lodging	Did you obtain prior written approval to exceed the maximum allowed?	Yes
2)	#46a DPA required - Lodging	Did you obtain prior written approval to exceed the maximum allowed?	Yes
3)	#46a DPA required - Lodging	Did you obtain prior written approval to exceed the maximum allowed?	Yes

I have reviewed the following documents.

**Travel & Expense Account
Transmittal Sheet**

Approved by:


MICHAEL S CUNNINGHAM

Travel & Expense Account Summary

Employee Name Renee ZITO
Expense Dates 11/08/09-11/11/09
Report Name CCAP Conference

Request Total \$ 763.77
Direct Charge Total - 0.00
Travel Advances - 0.00
Net Due Employee = 763.77

Trip Totals		
Trip/Expense Category	Trip Name	Total Amount
Regular Travel	CCAP	763.77

NOTE: (d)=Direct Charge

DATE	Sun Nov 8	Mon Nov 9	Tue Nov 10	Wed Nov 11						TOTAL
Lodging	132.09	132.09	132.09							396.27
Dinner	18.00	18.00	18.00							54.00
Breakfast		6.00	6.00	6.00						18.00
Lunch		10.00	10.00	10.00						30.00
Incidentals		6.00	6.00	6.00						18.00
Mileage, Personal Auto				247.50						247.50
TOTALS \$	150.09	172.09	172.09	269.50						763.77

**Travel & Expense Account
Transmittal Sheet**

After Approval, Mail Receipts To

Alcohol & Drug Programs RF#209
1700 K Street
Sacramento, CA 95814



Employee Name	ZITO, Renee
Expense Dates	11/18/09-11/18/09
Total Expense Amount	117.75
Amount Due Employee	117.75
Form ID	TEA000544986

I have reviewed the following documents.

Approved by:

MICHAEL S CUNNINGHAM

Travel & Expense Account Summary

Employee Name
Expense Dates
Report Name

Renee ZITO
11/18/09-11/18/09
Friendship House

Request Total \$ 117.75
Direct Charge Total - 0.00
Travel Advances - 0.00
Net Due Employee = 117.75

Trip Totals		
Trip/Expense Category	Trip Name	Total Amount
Regular Travel	Friendship	117.75

NOTE: (d)=Direct Charge

DATE	Wed Nov 18									TOTAL
Parking, Auto	8.00									8.00
Mileage, Personal Auto	101.75									101.75
Bridge Tolls	8.00									8.00
TOTALS \$	117.75									117.75